

## **EXHIBIT J**

**EQUAL EMPLOYMENT OPPORTUNITY COMMISSION**

Mr Vahan Karabajakian  
Chairman  
L A Weight Loss Center  
255 Business Center Drive  
Suite 150  
Horsham, PA 19044

PERSON FILING CHARGE	
Diggs, Althea	
THIS PERSON (check one)	
<input checked="" type="checkbox"/> CLAIMS TO BE AGGRIEVED	
<input type="checkbox"/> IS FILING ON BEHALF OF ANOTHER	
DATE OF ALLEGED VIOLATION	
Earliest	Most Recent
02/12/1999	02/22/1999
PLACE OF ALLEGED VIOLATION	
Oxon Hill, MD	
CHARGE NUMBER	
120990876	

**NOTICE OF CHARGE OF DISCRIMINATION**

(See EEOC "Rules and Regulations" before completing this Form)

You are hereby notified that a charge of employment discrimination has been filed against your organization under:

- TITLE VII OF THE CIVIL RIGHTS ACT OF 1964
- THE AGE DISCRIMINATION IN EMPLOYMENT ACT OF 1967
- THE AMERICANS WITH DISABILITIES ACT
- THE EQUAL PAY ACT (29 U.S.C. SECT. 206(d)) investigation will be conducted concurrently with our investigation of this charge.

The boxes checked below apply to your organization:

1.  No action is required on your part at this time.
2.  Please submit by \_\_\_\_\_ a statement of your position with respect to the allegation(s) contained in this charge, with copies of any supporting documentation. This material will be made a part of the file and will be considered at the time that we investigate this charge. Your prompt response to this request will make it easier to conduct and conclude our investigation of this charge.
3.  Please respond fully by \_\_\_\_\_ to the attached request for information which pertains to the allegations contained in this charge. Such information will be made a part of the file and will be considered by the Commission during the course of its investigation of the charge.

For further inquiry on this matter, please use the charge number shown above. Your position statement, your response to our request for information, or any inquiry you may have should be directed to:

Baltimore District Office  
10 South Howard Street  
Third Floor  
Baltimore, MD 21201

Wilma Scott, Supervisory Investigator  
(Commission Representative)

(410) 962-0887

(Telephone Number)

Enclosure: Copy of Charge

**BASIS OF DISCRIMINATION**

RACE  COLOR  SEX  RELIGION  NAT. ORIGIN  AGE  DISABILITY  RETALIATION  OTHER

**CIRCUMSTANCES OF ALLEGED VIOLATION**

DATE  
04/06/1999

TYPED NAME/TITLE OF AUTHORIZED EEOC OFFICIAL

Gerald Kiel (Acting Director)

SIGNATURE

This form is affected by the Privacy Act of 1974; See Privacy Act Statement before completing this form.

FEPA  
 FEOG

120990876

MD. Commission on Human Relations and EEOC  
*State or local Agency, if any*

NAME (Indicate Mr., Ms., Mrs.) <b>Ms. Althea Diggs</b>		HOME TELEPHONE (Include Area Code) <b>(301) 292-2233</b>			
STREET ADDRESS <b>13004 Strathaven Circle, Fort Washington, MD 20744</b>		DATE OF BIRTH <b>01/26/1969</b>			
CITY, STATE AND ZIP CODE					
NAMED IS THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY APPRENTICESHIP COMMITTEE, STATE OR LOCAL GOVERNMENT AGENCY WHO DISCRIMINATED AGAINST ME (If more than one list below.)					
NAME <b>L A Weight Loss Center</b>	NUMBER OF EMPLOYEES, MEMBERS <b>Cat D (501 +)</b>	TELEPHONE (Include Area Code)			
STREET ADDRESS <b>6243 Livingston Road, Oxon Hill, MD 20745</b>	CITY, STATE AND ZIP CODE	COUNTY <b>033</b>			
NAME	TELEPHONE NUMBER (Include Area Code)				
STREET ADDRESS	CITY, STATE AND ZIP CODE	COUNTY			
CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es))					
<input type="checkbox"/> RACE	<input type="checkbox"/> COLOR	<input checked="" type="checkbox"/> SEX	<input type="checkbox"/> RELIGION	<input type="checkbox"/> NATIONAL ORIGIN	DATE DISCRIMINATION TOOK PLACE EARLIEST
<input type="checkbox"/> RETALIATION	<input type="checkbox"/> AGE	<input type="checkbox"/> DISABILITY	<input type="checkbox"/> OTHER (Specify)	LATEST	
			<b>02/12/1999</b>		<b>02/22/1999</b>
			<input type="checkbox"/> CONTINUING ACTION		

**THE PARTICULARS ARE** (*If additional space is needed, attach extra sheet(s):*)

- I. I had been employed by the above-named employer since March 1, 1998. On February 9, 1999, I informed my employer that I was pregnant. On February 12, 1999, I was told that I could request a leave of absence or be demoted from my position as Center Manager to a counselor position. On February 22, 1999, I was disciplined and then discharged.
  - II. I was informed by the Area Manager that I could no longer be the Manager of my center because I was pregnant. I was informed by the Area Manager that I was being disciplined for a January 26, 1999, tardiness incident and for refusing to work at another center on February 4, 1999. No reason was given to me by the Area Manager for my discharge.
  - III. I believe that I was demoted, disciplined and discharged because of my pregnancy, in violation of Title VII of the Civil Rights Act of 1964, as amended.

<input type="checkbox"/> I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or telephone number and cooperate fully with them in the processing of my charge in accordance with their procedures.	NOTARY - (When necessary for State and Local Requirements)  I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.
I declare under penalty of perjury that the foregoing is true and correct.	SIGNATURE OF COMPLAINANT
Date 3/21/99	SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (Day, month, and year)